## PRIVATE Revised 01-03-2006

Profile Level	Musculoskeletal Abnormality	General Debility or Impairment	Medical Report Required	Interval for Review	License Class & Restrictions
1	No history or full recovery for one year or more	No history or full recovery for one year or more	No	N/A	Private vehicles
2	Minimal residual loss of function	Minimal residual loss of function	Yes	5 yrs	Private vehicles
3	Mild residual loss of function with or without compensatory device	Mild residual loss of function	Yes	5 yrs	Private vehicles
4	Moderate loss of function with or without compensating device  New or changed medical condition in the past five (5) yrs	Moderate persisting loss of function a  New or changed medical condition in the past five (5) yrs	Yes	2 years c	Private vehicles with recommendation of health care provider and must pass driving skills test; restrictions to be determined by Examiner and approval of Medical Advisory Board
5	Congenital absence or deformity of a limb or the spine, traumatic or surgical amputations, or limitations of joint motion by fusion, arthritis, contractures, etc. a b  New or changed medical condition in the past five (5) yrs	Moderate residual loss of function a  New or changed medical condition in the past five (5) yrs	Yes	1 year c	Private vehicles with recommendation of health care provider and must pass driving skills test; restrictions to be determined by Examiner and approval of Medical Advisory Board
6	Congenital absence or deformity of a limb or the spine, traumatic or surgical amputations, or limitations of joint motion by fusion, arthritis, contractures, etc., need for prosthetic or other device, or impairment requiring assistance of responsible licensed driver, such as variable weakness, episodes of pain, etc. a b	General debility or impairment from cancer, aging, chronic infections such as HIV, malnutrition, chemotherapy, drugs, or other treatment, chronic pain syndromes, etc., or requiring assistance of licensed driver a	Yes	1 year c	Private vehicles and must pass driving skills test; restrictions to be determined by Examiner; MAB only if driver requests removal of any required restrictions
7	Circumstances not covered by any of the above or patient under evaluation a		Yes	1 year c	As recommended by health care professional. Approval of Medical Advisory Board.
8	Chronic conditions making driving unsafe. Not fully compensated for by restorative devices		Yes	N/A	No driving

- a. Profile should be indicated by the health care professional according to their best information and should indicate on the form if a driving test is required
- b. If compensatory devices used or in case of chronic disease
- c. Longer interval or shorter, as recommended by health care professional according to stability

Approved by Medical Advisory Board 1-11-06